

| PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2010 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).) | | Attorney Docket No. <div style="text-align: right; font-size: 1.2em;">8734.257 US</div> | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|------------|--|------------------|--|------------|-------------------------|--|---|-------|------|------------------|---|-------|-------|----------|---|--------|-------|----------|--|--------|-------|----------|--|--------|--------|----------|
| Application Number: 10/717,542 | | Filed: November 21, 2003 | | | | | | | | | | | | | | | | | | | | | | | | | |
| For: DISPENSER FOR LIQUID CRYSTAL DISPLAY PANEL AND DISPENSING METHOD USING THE SAME | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Art Unit: 1792 | | Examiner: Yewebdar T. Tadesse | | | | | | | | | | | | | | | | | | | | | | | | | |
| <p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.</p> <p>The requested extension and fee are as follows (check time period desired and enter appropriate fee below):</p> <table style="width: 100%; margin-top: 10px;"> <thead> <tr> <th></th> <th style="text-align: center;"><u>Fee</u></th> <th style="text-align: center;"><u>Small Entity Fee</u></th> <th></th> </tr> </thead> <tbody> <tr> <td><input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))</td> <td style="text-align: center;">\$130</td> <td style="text-align: center;">\$65</td> <td>\$ <u>130.00</u></td> </tr> <tr> <td><input type="checkbox"/> Two months (37 CFR 1.17(a)(2))</td> <td style="text-align: center;">\$490</td> <td style="text-align: center;">\$245</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Three months (37 CFR 1.17(a)(3))</td> <td style="text-align: center;">\$1110</td> <td style="text-align: center;">\$555</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Four months (37 CFR 1.17(a)(4))</td> <td style="text-align: center;">\$1730</td> <td style="text-align: center;">\$865</td> <td>\$ _____</td> </tr> <tr> <td><input type="checkbox"/> Five months (37 CFR 1.17(a)(5))</td> <td style="text-align: center;">\$2350</td> <td style="text-align: center;">\$1175</td> <td>\$ _____</td> </tr> </tbody> </table> <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. <input type="checkbox"/> A check in the amount of the fee is enclosed. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account. <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees, which may be required, or credit any overpayment, to Deposit Account No. <u>50-0911</u> . I am the <input type="checkbox"/> applicant/inventor. <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96). <input checked="" type="checkbox"/> attorney or agent of record. Registration Number <u>53,005</u> <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____ | | | | | <u>Fee</u> | <u>Small Entity Fee</u> | | <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ <u>130.00</u> | <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ _____ | <input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) | \$1110 | \$555 | \$ _____ | <input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) | \$1730 | \$865 | \$ _____ | <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ _____ |
| | <u>Fee</u> | <u>Small Entity Fee</u> | | | | | | | | | | | | | | | | | | | | | | | | | |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) | \$130 | \$65 | \$ <u>130.00</u> | | | | | | | | | | | | | | | | | | | | | | | | |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) | \$490 | \$245 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | |
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| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) | \$2350 | \$1175 | \$ _____ | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="font-family: cursive; font-size: 1.2em; margin-bottom: 5px;">Valerie P. Hayes</div> <div style="text-align: center; font-size: 0.8em;">Signature</div> | | <div style="text-align: right; font-weight: bold; margin-bottom: 5px;">April 7, 2010</div> <div style="text-align: right; font-size: 0.8em;">Date</div> | | | | | | | | | | | | | | | | | | | | | | | | | |
| <div style="text-align: center; font-weight: bold; margin-bottom: 5px;">Valerie P. Hayes</div> <div style="text-align: center; font-size: 0.8em;">Typed or printed name</div> | | <div style="text-align: right; font-weight: bold; margin-bottom: 5px;">(202) 496-7500</div> <div style="text-align: right; font-size: 0.8em;">Telephone Number</div> | | | | | | | | | | | | | | | | | | | | | | | | | |

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below

☐ Total of 1 forms are submitted.